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## UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	35.C14921	0 10	
First Name	ed Inventor or Application Identifier		
YASUHIRO HINO			
Express Mail Label No.		7	
	Commissioner for Patents	80	

	Express Mail Label No.						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application conte	Commissioner for Patents Box Patent Application Washington, DC 20231						
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
2. Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
3. X Specification Total Pages 33	a. Computer Readable Form (CRF)						
4. X Drawing(s) (35 USC 113) Total Sheets 15	b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or						
5. Oath or Declaration Total Pages	ii. paper						
a. Newly executed (original or copy)	c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS						
b. Copy from a prior application (37 CFR 1.63(d (for continuation/divisional with Box 17 complete	)						
i. DELETION OF INVENTOR(S) Signed Statement attached deleting inv	antor(s)  37 CFR 3.73(b) Statement (when there is an assignee)  Power of Attorney						
named in the prior application, see 37 C 1.63(d)(2) and 1.33(b).	11 English Translation Document (if applicable)						
6. X Application Data Sheet. See 37 CFR 1.76	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
	13. Preliminary Amendment						
	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
	16. Other:						
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:							
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:							
X Continuation Divisional Continuation-in-part (CIP) of prior application No/  Prior application information: Examiner Group/Art Unit:							
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
18. CORRESPONDENCE ADDRESS							
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below							
NAME							
Address							
City State	Zip Code						
Country Telephone	Fax						

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
	TOTAL CLAIMS (37 CFR 1.16(c))	16-20 =	0	X \$ 80.00 =	\$0 <b>.</b>	
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 80.00 =	\$0	
·	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$270.00 =				\$0 <b>v.es</b>	
				BASIC FEE (37 CFR 1.16(a))	\$710.00	
			Total of	above Calculations =	\$710.00 부	
	Reduction by	0				
				TOTAL =	\$710.00	
a.	A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.					
b. c.			n the prior nonprovisiona	al application and suc	h status is still proper	
C.	Is no longe				h status is still proper	
c. 0.	Is no longo	er claimed.	er the filing fee is enclos	sed.	h status is still proper	
c. 0	Is no longo	er claimed. unt of \$ <u>710.00</u> to cov unt of \$ to co	er the filing fee is enclos	sed. enclosed.		
c. 0	Is no longer  A check in the amo  A check in the amo  e Commissioner is hereby 06-1205:  X Fees requ	er claimed. unt of \$ <u>710.00</u> to cov unt of \$ to co	er the filing fee is enclos	sed. enclosed.		
c. (20. (2) (21. (22. The No	Is no longer  A check in the amo  A check in the amo  e Commissioner is hereby 06-1205:  X Fees requ	er claimed.  unt of \$ <u>710.00</u> to cov  unt of \$ to co	er the filing fee is enclos	sed. enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Jack M. Arnold			
SIGNATURE	Jock M. and Reg. No. 25,823			
DATE	November 9, 2000			